### **CITY OF TAYLORSVILLE**

#### **WATERWORKS**

#### **CUSTOMER FORM**

Customer (	s) Name:	****	Date in	
Phone #		Cust Type	Cycle #	_
Street Addr	ess of Service:			
Billing Addr	ress:			
Other:				
Driv	ver's License	S S Number	er	
Wor	k Phone #	Fax/Cell	E-mail	
Are you: Th	e owner? The Tenar	nt? Owner's Name		
are respons Account nun		nes should be given when number will be assigned by contact the contact that the contact is a second to the contact the contact that the contact the contact that the contact the contact that the contact that the contact the contact that the con	urity number for the account. If the account is started and dep office. osit and \$30.00 activation Fee	
	**	****For Office Use Only****	***	
Reading	Beginning /Final Rdg	Date		
Deposit	Amount	Refundable amount	Date	
	Receipt#			
Handheld	Location DS (MXU#)			

# CITY OF TAYLORSVILLE WATER & SEWER DEPARTMENT

## **WATER & SEWER SERVICE AGREEMENT**

This is an agreement entered into this	s the day of
,2 ,	by and between the City of
Taylorsville (Water Dept.), hereinafte	
, he	ereinafter referred to as the
"Customer and/or Owner". This agree	eement shall be deemed as a
binding contract between the City an	d the Customer/Owner.
and/or sewer service to said address and	_, request the City to furnish water
and/or sewer service to said address and	d hence agrees to receive service and
pay in full for services rendered in acco	ordance with the City's standard rules
and rates, as filed per Ordinance.	× ) ×
Upon the request for water service, the Custon	her assumes full responsibility for water
services rendered and accepts ownership of we	ater service metered. In the event that the
Owner of said water service meter chooses to	
remain responsible for any unpaid fees created	
discontinued for non-payment, all fees must resume.	e paid in full before water service shall
Disclaimer: The City shall not be resp	omsible for any portion of the
customer's service line beginning at the	
connection.	, and the second
OY	
Customer's Name:	S.S.#
,	
C P N	0.0.11
Spouse's Name:	S.S.#
Service Address:	
Account No:#	Amt Rec'd
Customer Signature	City Representative

# CITY OF TAYLORSVILLE WATER & SEWER DEPARTMENT

## **WATER & SEWER SERVICE AGREEMENT**

This is an agreement entered in	to this the day of
, 2	, by and between the City of
Taylorsville (Water Dept.), here	einafter referred to as the "City" and
	, hereinafter referred to as the
"Customer/Tenant". This agree contract between the City and t	ement shall be deemed as a binding
I,	, request the City to furnish water
and/or sewer service to said addre	, request the City to furnish water ess and hence agrees to receive service and
	n accordance vita the City's standard rules
and rates, as filed per Ordinance #	<sup>‡</sup> 291, adopted June 25, 2007.
Upon the request for water and/or	sewer service, the Customer/Tenant
	ter ser ises rendered. The discontinuance
	all account fees must be paid in full
	Custo rer/Tenant grants permission to the
	on, without notification, to the landlord for
any discrepancies due to on-payi	ment of services.
	0.0.11
Customer's Name:	S.S.#
Spouse's Name:	S.S.#
	2.00011
Service Address:	
A	
Account No:#	Amt Rec'd
Customer Signature	City Representative